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A STUDY OF THE ARMY COMMUNITY SERVICE (ACS) PROGRAM.(U)
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A STUDY OF THE
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FINAL REPORT

BY

MAJ JOSEPH F. GORECKI, DAAG-PL
MR. FRANK J. LONSKI, DAAG-PL

THE ADJUTANT GENERAL CENTER
PLANS AND OPERATIONS DIRECTORATE

JULY 1977

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FOREWARD

The responsible organization for this study is the Plans and Operations Directorate, the office of The Adjutant General, Department of the Army.

The study team was composed of MAJ Joseph F. Gorecki and Mr. Frank J. Lonski, Management Division, Plans and Operations Directorate.

Guidance and assistance was provided by the following personnel: from the Plans and Operations Directorate, COL L. J. Harmon II and LTC Robert L. Dilworth; and from the Community Service Division, Morale Support Directorate, The Adjutant General Center, LTC Robert Jungck and Mr. Robert Duncan. All others who provided data and assistance during the conduct of this study are gratefully acknowledged.

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EXECUTIVE SUMMARY

SECTION I

Statement of the Problem

1. General. The problem, as outlined in the study directive (Annex A), is the need for more emphasis on the Army Community Service (ACS) Program in terms of publicity, standardization and support. This is of particular importance in light of the steady erosion of benefits associated with the military service; the growing number of junior enlisted personnel with dependents who are in biggest need of social welfare services; and the fact that a good ACS program should be the prime source of satisfying these needs. The ACS Program is not clearly understood by all commanders and clientele; the elements, terms and scope of the ACS Program are not clearly defined or standardized; and ACS support personnel are not thoroughly trained in the operation and administration of an ACS Program.

SECTION II

Background

2. Background. One important means of at least partially compensating for the erosion of benefits associated with military service is the enhancement of the quality of Army life. This effort is highlighted in FY 78 Department of the Army Study Planning Guidance which emphasizes the need for prompt evaluation of services provided the soldier and identification of areas requiring improvement. A Department of Army Inspector General Special Inspection of the ACS Program was conducted during the first quarter of FY 77. Findings indicated that while the overall program is good, it suffers from lack of standardization, non-uniform training and a misunderstanding by commanders and the military community.

3. Purpose. The purpose of this study was to define the elements/terms of the ACS Program; to categorize these elements (services) into distinct modules; and to integrate these modules into a model program to include guidelines for implementation and operations.

4. Objective. The overall objective of this study was to develop policies, standards and procedures for the ACS Program with a view toward improving service and increasing program efficiency.

SECTION III

Approach to the Problem

5. Methodology. This study was conducted in three phases; Phase I - Data Collection; Phase II - Data Evaluations; and Phase III - Module/Model Development. A fourth phase, model test and evaluation was not included in the study effort. An evaluation plan will be developed as a follow on to the study effort.

a. Phase I was accomplished by an administrative review of all appropriate documentation; staff visits to Army and other service (Navy, Air Force) installations; participation in meetings and workshops; and the conduct of personal interviews.

b. Phase II consisted of: an evaluation of the current ACS Program; an analysis of all candidates for possible inclusion in a revised ACS Program; the categorization of clientele of the program to determine the category of the biggest need; a classification of the different environments in which a program must operate by environmental problems encountered; and the categorization of services provided as essential or optional.

c. Phase III was accomplished utilizing the results of the evaluation performed in Phase II and consisted of: the development of the categories of services into individual modules; the integration of these modules into a model program; and the definition of the organization of ACS Program staff and key volunteers.

SECTION IV

Findings/Conclusions/Recommendations

6. Findings/conclusions.

a. The current ACS Program was found to be loosely defined and poorly structured and therefore subject to local interpretation. The support provided the program and services rendered were dependent to a large measure on the command emphasis a program received.

b. The current categories of services provided are ill-defined and should be revised to present a more standardized and structured program. Personnel must be adequately trained in order to effectively administer an ACS Program. The program must be flexible enough to respond to the changing needs of the military community in many and varied environments.

c. Responsibilities for program management need to be better delineated and expanded. More emphasis must be placed on participation in the budget process and on accurate reporting.

7. Recommendations.

a. That the concept for publicizing, standardizing and supporting the ACS Program be incorporated into a revised ACS Program. HQDA must provide resources for all essential elements of the revised program.

b. That an evaluation plan be developed for use subsequent to the implementation of the revised ACS Program.

SECTION I

STATEMENT OF THE PROBLEM

1. Statement of the Problem.

a. General: The problem, as outlined in the study directive (Annex A), is the need for more emphasis on the Army Community Service (ACS) Program in terms of publicity, standardization and support. This is of particular importance in light of the steady erosion of benefits associated with the military service; the growing number of junior enlisted personnel with dependents who are in biggest need of social welfare services; and the fact that a good ACS program should be the prime source of satisfying these needs.

b. Publicity: The ACS program is not clearly understood by all commanders and clientele. The key to a clear understanding is first, a well defined program and then a thorough orientation of commanders and clientele on all aspects of that program.

c. Standardization: The elements, terms and scope of the ACS program are not clearly defined and standardized. The current program is loosely structured and leaves too much room for interpretation. The variations which result from these different interpretations create non-standard programs which contribute to the Army-wide lack of understanding of the ACS program.

d. Support: Not all ACS program support personnel (ACS staff and key volunteers) are thoroughly trained in the operation and administration of an ACS program. The largest single area requiring improvement is in the knowledge of the budget process. ACS support personnel should participate in the development of budgetary requirements for their program.

2. Problem Summary. More direction needs to be given to the ACS program in terms of publicity, standardization and support. The ACS program is not clearly understood by all commanders and clientele; the elements, terms and scope of the ACS program are not clearly defined or standardized; and ACS support personnel are not thoroughly trained in the operation and administration of an ACS program.

SECTION II

BACKGROUND

1. General.

a. One important means of at least partially compensating for the erosion of benefits associated with military service is the enhancement of the quality of Army life. This effort is highlighted in FY 1978 Department of the Army Study Planning Guidance which emphasizes the need

for prompt evaluation of services provided the soldier and the identification of areas requiring improvement.

b. The Adjutant General has broad responsibility for programs that support the soldier and his/her dependents. One very important program is the ACS program which offers a variety of individual services. The ACS program is intended to be the prime source of assistance in time of need; should contribute to the feeling of community; and should lend credence to the theme "The Army takes care of its own".

c. A Department of Army Inspector General Special Inspection of the ACS program and child care centers was conducted during the first quarter of FY 77. Findings indicate that while the overall program is a good one, it suffers from lack of: standardization, uniformly effective training, and understanding by commanders and the military community. The biggest single problem was the need for financial planning and assistance services for junior enlisted servicemembers with dependents.

d. The DAIG findings were supported by a preliminary evaluation of the ACS program within TAGCEN. Based on reports received, programs and funding vary widely between installations; commanders do not clearly understand the services provided and how they are provided; and soldiers do not have a clear conception of services available.

2. Purpose/Objectives.

a. Purpose: The purpose of this study, as stated in the study directive (Annex A), was to define the elements/terms of the ACS program; to categorize the elements (services) into distinct modules; and to intergrate these modules into a model program to include guidelines for implementation and operation.

b. Objectives: The overall objective was to develop policies, standards and procedures for the ACS program with a view toward improving service and increasing program efficiency. Sub-objectives were:

(1) To define the elements/terms of the ACS program and categorize them as essential or optional.

(2) To categorize services into distinct modules based on clientele served, the type environments in which the program must operate, and the need for those services.

(3) To integrate those modules into an ACS model program and provide instructions for its implementation and operation.

(4) To define the duties of, training requirements for, and organization of ACS support personnel.

(5) To evaluate the model ACS program.

3. Scope.

a. This study was limited to:

(1) The ACS program as administered by the Community Service Division, Morale Support Directorate, The Adjutant General Center IAW AR 608-1.

(2) Administration of Army Emergency Relief (AR 930-4), Red Cross (AR 930-5), Retirement Services (AR 608-25), Army Child Advocacy (AR 600-48), Dependent Youth Activities (AR 28-1), Army Consumer Representation (AR 608-17), and Child Care Programs.

b. Those areas in the category of Welfare and Morale that are the responsibility of the Director, Human Resources Development, ODCSPER were not studied but were considered in evaluating overall delivery systems.

c. This study was directed at the delivery of services at installation level.

SECTION III

APPROACH TO THE PROBLEM

1. General. This study was to be conducted in four phases: Phase I - Data Collection; Phase II - Data Evaluation; Phase III - Module/Model Development; and Phase IV - Model Test and Evaluation. During the conduct of the study, it was determined that a test would not be necessary and that the revised ACS program would be turned over to the Morale Support Directorate upon completion of Phase III for implementation. Program evaluation (Objective 5) will be performed as a follow on action.

2. Phase I - Data Collection. During this phase, data was collected through administrative review, staff visits, interviews and meetings.

a. The administrative review considered all appropriate regulations, reports, pamphlets and related studies. A complete list is contained in the reference section of this report. A discussion of the findings is contained in Section IV.

b. Staff visits were made to the ACS centers at Ft. Myer, Virginia (Annex B); Ft. Belvoir, Virginia (Annex C); Ft. Carson, Colorado (Annex D); Ft. Hood, Texas (Annex E). Additionally, visits were made to Bolling Air Force Base, District of Columbia (Annex F) and Arlington Annex, Arlington, Virginia (Annex G).

(1) The Army programs will be analyzed in Section IV of this report.

(2) The Air Force and Navy programs rely heavily on volunteers with few authorized spaces for permanent staff. As such they primarily provide information, assistance and a lending closet service.

c. Interviews/meetings were held with the following individuals:

(1) An interview was held with Mrs. Barton of the Fairfax County Department of Social Services, Fairfax, Virginia. Purpose of this interview was to determine any interface with Army installations, services offered and servicemember eligibility for these services.

(a) Mrs. Barton stated that her department works in close coordination with the Army Community Service Program at Ft. Belvoir, Virginia. This was primarily in the area of information and referral.

(b) All servicemembers residing in Fairfax County are eligible for county social services; however, very few, if any qualified for free services. Cost for provision of required services is pro rated based upon the servicemember's income.

(c) Social services provided by Fairfax County are all encompassing. A list is provided at Annex H.

(2) A workshop was held with MAJ Frank Quinn, team chief for the Integration of Human Services Support Activities Study Group. This study, conducted by US Army Administration Center, addresses all functions which could be considered services to and for the servicemember and discusses potential delivery systems at installation level aimed at eliminating unnecessary duplication and overlap. Details of this meeting and an outline of the study are at Annex I.

(3) A meeting was held with most MACOM ACS officers at the Forrestal Building on 25 Feb 77. The purpose of this meeting was to discuss the ACS Study and its objectives; to address the ADMINCEN study; and to solicit comments for a revised ACS Program. All present agreed that the ACS Program was in need of improvement and saw the study as an ideal vehicle to accomplish this. A summary of this meeting is at Annex J.

3. Phase II - Data Evaluation. This phase of the study consisted of the following major elements: an evaluation of the current ACS Program; a review of all possible candidates to be included in the revised program; a categorization of types of services to be offered in the revised program; a categorization of all servicemember clientele; and a classification of the different environments in which an ACS Program must operate.

a. The evaluation of the current program was performed utilizing data gathered in Phase I. A discussion of this evaluation is contained in Section IV.

b. A review was made to evaluate all possible candidates for inclusion in the revised ACS Program. These included all categories of services currently in the ACS Program and all other candidates which could be associated with the program. A listing of all those candidates and a discussion of each is contained in Section IV.

c. The DAIG Special Inspection of the ACS Program recommended that services provided should be categorized as essential and optional. A further evaluation of this recommendation found this a practical approach. Prior to separation of services into these categories, a definition of each had to be developed. This was best handled by the development of criteria for categorization of services as either essential or optional. These criteria are listed at Figure 3-1. The discussion of the categorization of services is contained in Section IV.

d. The evaluation of clientele who use the services the ACS Program provides considered all those eligible for these services. A listing of those eligible for ACS Program services and an evaluation of these clientele is contained in Section IV.

e. The categorization of environments was developed based upon the type of environmental problems that are encountered by servicemembers and their dependents. This approach was chosen since ACS programs must operate in many and varied locations under a wide set of circumstances and situations. The environmental problems listed in Figure 3-2 were incorporated into the baseline used to develop the revised ACS Program.

4. PHASE III - Module/Model Development.

a. Phase III consisted of the following elements: development of categories of services into individual modules; integration of these modules into a model program; and the definition of the organization of ACS Program staff and key volunteers, to include their duties.

b. As discussed in Phase II, services were to be categorized as either essential or optional. The groups of services in each of these categories are defined as modules. Each one of these modules is defined as a subprogram of either category. Applying the criteria (Figure 3-1) developed in Phase II, each ACS Program candidate was evaluated and defined as an essential or optional service program. A detailed discussion of the services provided in each program (essential and optional) is contained in Section IV.

c. The concept for the integration of the essential and optional service modules (programs) into a model ACS Program is depicted in the chart at Figure 3-3. It provides for an optional category for each essential service program. This, in effect, directs the provision of minimum essential services and allows flexibility to expand each essential

CRITERIA FOR CATEGORIZATION OF SERVICES

ESSENTIAL

1. A definite need for the service must exist.
2. The service must not be provided elsewhere (i.e. military or civilian community).
3. If the service is provided elsewhere, there must be a prohibitive factor which would negate its use (e.g. excessive cost, distance).
4. Administration of service must be performed and/or supervised by ACS program staff.
5. The service must be funded by HQDA.
6. The service must contribute to the social welfare of members of the military community.

OPTIONAL

1. The service must not detract from the provision of essential services.
2. It must lend itself to association with the ACS Program.
3. The need must exist; however, duplication of similar services must be avoided.
4. The service must contribute to the social welfare of the military community.

Figure 3-1

ENVIRONMENTAL PROBLEMS ENCOUNTERED

PROBLEM

SEPARATIONS

CULTURAL SHOCK

ECONOMICS

LACK OF SERVICES

EXAMPLE

Unaccompanied tours, TDY requirements.

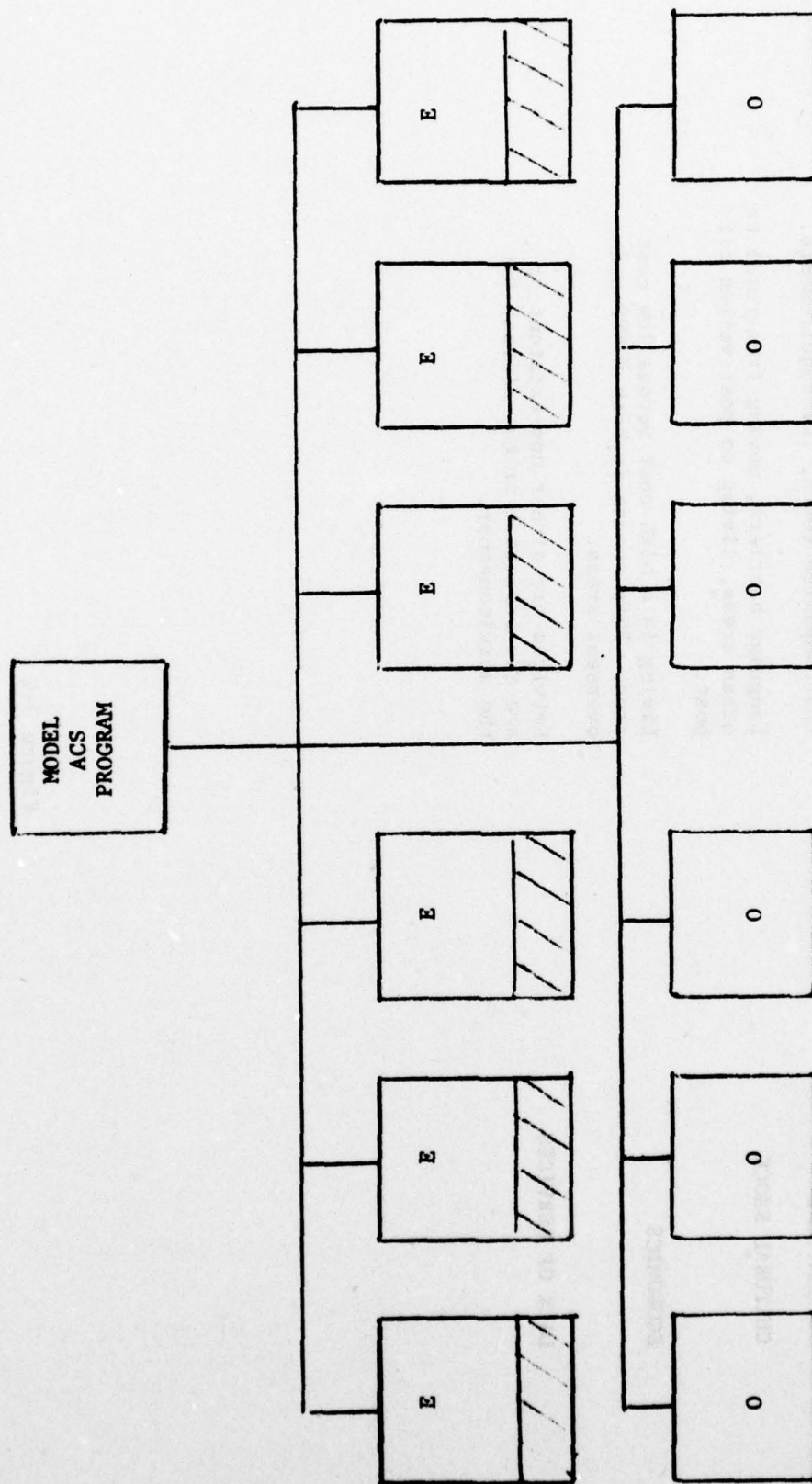
Language barriers, moving from rural to urban areas, living on post versus off post.

Living in a high cost versus low cost area. This occurs in both CONUS and overseas areas.

Services are either non-existent or are too expensive or too distant for the servicemember.

Figure 3-2

CONCEPT FOR MODEL ACS PROGRAM



E = essential service programs
 O = optional service programs
 Slashed boxes indicated capabilities to add optional services.

Figure 3-3

service program based upon resources available to the installation commander. The model ACS Program is meant to be flexible enough to be tailored to operate in any type environment. As such three types of programs (A, B, and C) were developed and are defined in Section IV.

d. ACS Program organization and duties of key personnel are discussed in Section IV.

5. Phase IV - Model Test and Evaluation. During the conduct of this study it was determined that a test of this program would not be necessary. An evaluation plan for the revised ACS program will be developed as a follow on to this study.

SECTION IV

FINDINGS AND DISCUSSION OF FINDINGS

1. General.

a. The current ACS Program was found to be loosely defined and therefore subject to local interpretation. The resultant programs varied from installation to installation with respect to the degree of support for the program and the number and type of services provided. This was dependent to a large measure on the emphasis placed on the program by the installation commander.

b. The current categories of services provided are ill-defined and should be modified to present a more standardized and structured program.

c. The list of personnel currently eligible for the services provided through the ACS Program (see Figure 4-1) is all inclusive and need not be changed; however, users of ACS Program services need to be categorized with emphasis on the category with the most pressing need, the off-post, junior enlisted servicemember with dependents. The categories established by the study team are at Figure 4-2. These were categorized by the demonstrated need for services provided. These categories of need were derived from DAIG findings and observations made during staff visits by The Adjutant General (TAG) and study team members.

d. Responsibilities for program management are currently not spelled out. These should be delineated for each level from policy maker to program operator. Directly related to the management process are funding and reporting responsibilities. Although these are currently outlined, they need to be better structured.

2. Discussion of current ACS Program, Staffing and Services. A comparison of four Army programs supports the finding that the current ACS Program is loosely defined and hence subject to local interpretation. The chart

PERSONNEL ELIGIBLE FOR ACS PROGRAM SERVICES

1. Active duty personnel & their dependents
2. Retired military personnel & their dependents
3. Members of the military reserve components on active duty for training and their dependents
4. DA civilians overseas and their dependents overseas
5. DA civilians in CONUS where local civilian resources are not available
6. Widows, widowers, & other next of kin, regardless of dependency status, of military personnel who were on active duty or retired at time of decease
7. Next of kin of POW/MIA of all armed services
8. Other personnel designated by the commanders

NOTE: Eligibility as listed in AR 608-1

Figure 4-1

CATEGORIZATION OF CLIENTELE

<u>CATEGORY</u>	<u>PERCENT OF ARMY POPULATION^{1/}</u>	<u>PERCENT WITH DEPENDENTS^{1/}</u>	<u>PRIORITY OF NEED FOR SERVICES^{2/}</u>	
			<u>OFF POST</u>	<u>ON POST</u>
Enlisted (E1-E4) ^{3/}	55.4	39.7	1	2
Enlisted (E5-6)	23.9	80.8	3	4
Enlisted (E7-E9)	8.0	93.5	5	6
Officers/Warrant	12.7	84.2	7	8

NOTES: ^{1/} Developed from MILPERCEN data.

^{2/} Developed by study team based on recognized need in current Army environments.

^{3/} Primary emphasis on E3 and E4.

Figure 4-2

at Figure 4-3 shows the differences in emphasis on staffing and the resultant services provided by each. The only constant is the presence of a strong, active corps of volunteers. Although many similar services are listed, the degree to which they are provided varies significantly. An analysis of all installation ACS Program reports further supports this finding (paragraph 4 below).

3. Staffing and Duties of Key Personnel.

a. The proposed organization for a revised ACS Program is at Figure 4-4. This is not meant to be restrictive and the number, type and priority of personnel assigned to operate an installation ACS Program will be dependent upon population size (yardstick code from DA Pam 570-551, Staffing Guide for US Army Garrisons), needs of the military community and desires of the installation commander.

b. The military and civilian personnel assigned to staff positions should have mature judgment, interest, and skill in human relations. Those with backgrounds in social work, psychology, education, financial management, consumer affairs, and administration are particularly desirable.

c. Training requirements for key personnel can currently be satisfied through existing courses. The ACS officer course, currently taught at the Health Sciences Academy, Ft. Sam Houston, Texas, is adequate; however, not all key ACS Program staff are offered the opportunity to attend. This will be somewhat remedied by the increase in course quotas and numbers of courses taught per year (this is discussed in Annex J). The Program of Instruction (POI) for this course is at Annex K. All ACS staff and key volunteers are eligible to attend.

d. All military, civilian and key volunteer personnel assigned to or volunteering services to the ACS Program, should be knowledgeable about social welfare problems in the military community.

e. Duties and responsibilities of key personnel should be as follows:

(1) ACS officer will:

(a) Operate the ACS Program in accordance with existing regulations and as directed by the installation commander.

(b) Maintain effective working relationships with commanders, staff agencies, local civilian community, and health and welfare activities.

(c) Establish a Volunteer Corps, volunteer programs, and ensure maximum effective utilization of volunteer skills.

(d) Supervise direct services being provided in the program.

COMPARISON OF ACS PROGRAMS AT FOUR INSTALLATIONS

ORGANIZATION

<u>FT. MYER, VA</u> <u>DSCPER</u>	<u>FT. BELVOIR, VA</u> <u>DPCA</u>	<u>FT. HOOD, TX</u> <u>GI/DPCA</u>	<u>FT. CARSON, CO</u> <u>DPCA</u>
Human Resources/ACS Division	Human Resources Division	Personnel Services Division	Human Resources Division
<u>ACS Branch</u>	<u>ACS Branch</u>	<u>ACS Branch</u>	<u>ACS Branch</u>
<ul style="list-style-type: none"> • ACS Off (M) • ACS Off (M) • NCOIC (M) • Social Worker (C) • Financial Counselor (C) • Accounts Clk (C) • Secretary (C) • Volunteer Corps 	<ul style="list-style-type: none"> • ACS Off* (M) • Social Worker (M) (AER Officer) • Admin Asst (C) • Behavioral Science Specialist (2) (M) • Driver* (M) • Volunteer Corps 	<ul style="list-style-type: none"> • ACS Off^{2/} (C) • Social Worker (M) • AER Off (M) • NCOIC (M) • Social Worker Representatives (2) (C) • AER Clerk (C) • Secretary (C) • Volunteer Corps 	<ul style="list-style-type: none"> • ACS Off^{1/} (C) • Social Worker (2) (M) • Budget Counselor (2) (C) • Clerk (C) • Volunteer Coordinator (NAF) (C) • AER Off* (M) • Admin Supervisor* (C) • Help Office* (4) (M) • Food Stamp Tech* (M) • Budget Clerk* (C) • Supply Sgt* (M) • Supply Clerk* (M) • Volunteer Corps

SERVICES

<p>Welcome & Reception</p> <p>Information & Referral</p> <p>Financial Counseling</p> <p>Loan Closet</p> <p>Food Locker</p> <p>AER</p> <p>Family Counseling</p> <p>Handicapped Program^{3/}</p>	<p>Welcome & Reception</p> <p>Information & Referral</p> <p>Financial Counseling^{3/}</p> <p>Loan Closet</p> <p>Food Locker</p> <p>AER</p> <p>Family Counseling^{3/}</p> <p>Handicapped Program^{3/}</p>	<p>Welcome & Reception</p> <p>Information & Referral</p> <p>Financial Counseling</p> <p>Loan Closet</p> <p>Food Locker</p> <p>AER</p> <p>Family Counseling</p> <p>Handicapped Program^{3/}</p> <p>Child Care</p>	<p>Welcome & Reception</p> <p>Information & Referral</p> <p>Financial Counseling</p> <p>Loan Closet (Furniture)</p> <p>Food Locker</p> <p>AER</p> <p>Family Counseling^{4/}</p> <p>Handicapped Program^{3/}</p> <p>Help Office</p>
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NOTES: * - Asterisk indicates special/extra duty.

^{1/} - Director of ACS Center

^{2/} - Head of Post Nursery Council

^{3/} - Provided by Volunteer(s)

^{4/} - Combined w/Mental Hygiene

(M) - Military

(C) - Civilian

PROPOSED ACS PROGRAM ORGANIZATION

ASSIGNED PERSONNEL ^{1/}

ACS Officer ^{2/}
Social Work Officer
AER Officer
Administrative Coordinator (NCOIC)
Financial Planning and Assistance Coordinator
Child Support Services Coordinator
Behavioral Science Specialist
Clerical/Administrative Staff

VOLUNTEER CORPS

Volunteer Supervisor
Assistant Volunteer Supervisor
Program Services Element Coordinator
Program Support Element Coordinator

NOTES: ^{1/} Number assigned is dependent on size of population served,
DA PAM 570-551.

^{2/} Functions as program operator and staff officer.

Figure 4-4

(e) Maintain a community-wide information program on ACS to ensure that unit commanders and their staff and all military personnel and their dependents are aware of available services.

(2) Social Work Officer:

(a) Will be responsible for the planning, development and implementation of professional social service programs.

(b) May assume the responsibilities of the Army Community Service Officer.

(c) If a Social Work Officer is not assigned, social work, technical consultation services will be provided by other local or Army area social work personnel.

(3) AER Officer:

(a) Will operate the Army Emergency Relief (AER) Program in accordance with AR 930-4.

(b) Will coordinate AER activities with other ACS Program activities to maximize the effectiveness of social and financial service output.

(c) May assume the responsibilities of the ACS Officer.

(4) Administrative Coordinator. The Administrative Coordinator--

(a) Will plan and coordinate procedures, methods, and workloads for efficient office operations.

(b) Will prepare reports and ensure agency compliance with regulations governing the use of appropriated and nonappropriated funds.

(c) May assume responsibilities of the ACS Officer (military officer or GS-07 civilian employee, and above).

(5) Financial Planning and Assistance Coordinators will:

(a) Develop policies and procedures, as directed by the local commander, for operating the ACS financial planning and assistance program.

(b) Maintain effective working relationships with unit commanders, staff judge advocates, inspectors general, public information officers, and other military and civilian staff agencies, credit unions, better business bureaus, and credit rating agencies located in the general vicinity of the installation.

(c) Provides technical expertise in the development and provision of consumer and financial planning education, budget planning and development and debt liquidation.

(6) Child Support Services Coordinator. The Child Support Services Coordinator--will be responsible for the planning, developing, coordinating and implementing of all the child care programs and requirements defined in this regulation to include--

(a) Establishing and implementing the administrative and operational policies and procedures for the various programs.

(b) Coordinating the various child care services to maximize their effectiveness.

(c) Advising unit commanders and key staff officers on the development of the child support services program.

(d) Acting as a liaison with on and off post social and educational services (i.e., child development programs in the local community, public welfare agencies, hospitals).

(e) Assuring that the staff working in the child support services programs are professionally trained to work with children.

(f) Establishing the educational aspects of the child support services program.

f. Structure of the Volunteer Corps.

(1) The volunteer supervisor and assistant supervisor will be appointed by and perform their duties under the policies prescribed by the local commander and under the direct supervision of the ACS officer. The position may be rotated between dependents of the officer and enlisted membership of the command. Notwithstanding this objective, the primary criteria for filling this position should be an individual's attributes and capabilities.

(2) The Volunteer Corps will be organized into two elements:

(a) The Volunteer Program Support Element. The Support Element will be composed of committees which directly support the Volunteer Program itself, or which provide additional administrative support to the ACS Program staff.

(b) The Volunteer Program Service Element. The Service Element will be composed of committees which provide direct ACS Program services in essential and optional services in the installation community.

(c) Volunteer training outlined in DA PAM 600-28 and in AR 608-1 is adequate; however, more flexibility and on-the-job training can be built into it. This will be revised and included in a handbook on the ACS Program.

4. Categories of Services.

a. Of primary interest and use were the installation Army Community Service Program Reports (DA Form 3063-R, Annex L). These reports, submitted annually for each FY, contain information on services provided; staffing and volunteer support; and operating cost and type of center. There are ten categories of services on the report with a total of 53 subelements. Nine of the ten categories have an entry marked "other". An analysis of the most current reports (period 1 July 75 through 30 Sep 76) revealed that there were a total of 173 services reported as "other". The majority of these could have been reported under a defined element of one of the ten categories. These reports showed that Army-wide, for the ten categories of services, approximately 4.7 million services were provided; 689 personnel supported the program on a full or part-time basis; the volunteer corps averaged 4,598 volunteers and 72,466 volunteer hours per month; and approximately \$3.4 million was spent on the program.

(2) A detailed breakout of the above data is contained in Figures 4-5 and 4-6.

(a) Figure 4-5 is a list of the ten categories of services from the current report form and the percentage of the total number of centers providing them.

(b) Figure 4-6 is a list, by MACOM, of personnel, centers, and funding support.

(3) A definition of the types of centers listed in Figure 4-6 follows:

(a) Class A - Has a full-time staff (social worker included) a volunteer corps; a designated facility; and provides essential services IAW AR 608-1.

(b) Class B - Same as a Class A but has no social worker.

(c) Class C - Has ACS officer as an additional duty, a volunteer corps and provides essential services IAW AR 608-1.

(d) Class D - Has ACS officer designated who serves as focal point to provide information.

CATEGORIES OF SERVICES (From DA Form 3063-R)

<u>CATEGORIES OF SERVICES</u>	<u>Percentage of Total Number of Centers Offering Services</u>	<u>Percent of contacts Made per Category</u>
Information/Referral/Followup <u>1/</u>	97	42
Financial Aid (Primarily AER)	63	1.5
Exceptional Children	46	0.8
Child Advocacy	50	1.0
Relocation Services <u>1/</u>	100	36.7
Emergency Assistance	49	0.6
Counseling (Personal & Family)	51	2.9
Community Life	28	4.3
General Assistance	29	7.5
Commercial Affairs	52	2.7
		<u>100</u>

NOTES: 1/ Required by AR 608-1

2/ Percentage derived by dividing number of services provided in each category by total number of services provided.

Figure 4-5

PERSONNEL, FUNDING AND CENTERS (For period 1 Jul 75-30 Sep 76)

MAJOR COMMAND	ACS STAFF	VOLUNTEER AVERAGES PER MONTH		APPROPRIATED	OPERATING COSTS (THOUSANDS \$)			TOTAL	NUMBER OF CENTERS BY TYPE				TOTAL
		PERSONNEL	HOURS		NAF	OTHER	3/		A	B	C	D	
FORSCOM	239 (57)	1,330	18,476	1,082.0	247.0	22.9		1,351.9	23	3	1	2	29
TRADOC	174 (53)	1,067	15,133	541.6	199.2	15.8		756.6	12	3	3	0	18
DARCOM	25 (5)	130	2,150	146.7	3.5	-		150.2	0	6	4	13	23
USACC	6	75	1,556	17.5	8.0	-		25.5	1	0	1	0	2
ESC	8	68	1,435	215.2	1.5	.4		217.1	2	1	0	0	3
MTWC	6	34	378	37.6	6.3	-		43.9	0	1	1	0	2
MDW	7 (1)	95	602	43.5	.6	-		44.1	1	0	0	0	1
USMA	1	49	576	7.4	1.8	-		9.2	0	1	0	0	1
USASA 2/	2	3	225	.6	-	-		.6	0	0	1	0	1
USAREUR	197 (41)	1,587	29,302	573.9	18.4	22.4		614.7	8	18	39	2	67
USARJ	8 (1)	57	1,243	17.1	140.9	-		158	1	1	0	0	2
USAREIGHT	16 (6)	103	1,390	30.1	2.6	1.4		34.1	0	2	1	4	7
TOTAL	689 (164) 1/	4,598	72,466	2,713.2	629.8	62.9		3,405.9	48	36	51	21	156

NOTES: 1/ Figures in parentheses are number of personnel of total who were special/extra duty.
2/ Installation reported was Vint Hill. Intelligence and Security Command was formed during reporting period. All other USASA figures reported as part of FORSCOM.
3/ Other funds primarily donations.

b. Each of the ten categories of services and elements thereof has been reviewed. The majority of these have been revised, consolidated or eliminated. These new categories and subelements are discussed in the following paragraphs.

c. Before defining the new categories of services, those candidates listed in Figure 4-7 but not included as essential or optional services will be discussed. Essential and optional services are listed in Figure 4-8.

(1) Red Cross Program. An analysis of this program revealed that Title 36, US Code establishes the fact that Red Cross employees are not government employees and as such could not operate under the ACS Program. This of course does not preclude colocation with an ACS Program as long as provisions of AR 930-5 are adhered to.

(2) Retirement Services Program. An analysis of this program indicated that integration of this program as defined in AR 608-25 with the ACS Program was not feasible. The programs are targeted at entirely different categories of personnel (officers and senior NCOs vs junior enlisted) and require a totally different type of expertise.

(3) Dependent Youth Activities. An analysis of this program defined it as one which is recreation oriented and which had different objectives from the ACS Program.

(4) General Assistance. This category was eliminated and certain elements within it are incorporated in new categories discussed below.

d. Essential Service Programs. These programs are those which are minimum essential to an ACS Program and will be administered and/or supervised by permanent ACS Staff. The subcategories of the Service Program are as follows--

(1) Information, Assistance, Referral and Followup Service Program. This program consists of both minimum essential and optional services. These services are normally administered by volunteers under the supervision of ACS staff personnel.

- (a) Information and referral file.
- (b) Hot line service.
- (c) ACS Program publicity (e.g., bulletin).
- (d) Followup on referral cases.
- (e) Personal Affairs Assistance (optional).

CANDIDATES FOR INCLUSION IN REVISED PROGRAM

Information, Referral & Followup*

Financial Air (AER)*

Exceptional Children*

Child Advocacy Program*

Relocation Services*

Child Care Services

Red Cross Program

Retirement Services Program

Counselling (Personal & Family)*

Consumer Representation Program

Community Life/Outreach*

Emergency Assistance*

Dependent Youth Activities

Commercial Affairs*

General Assistance*

NOTES: * All items with asterisk are in current programs.

Figure 4-7

ESSENTIAL SERVICE PROGRAM

- Information, Assistance, Referral & Followup Services Program
- Relocation Services Program (Includes Lending Closet)
- Financial Planning & Assistance Services Program (Food Locker)
- Outreach Services Program 1/
- Child Support Services Program (Includes Child Care Center, Child Advocacy Program)
- Handicapped Dependents Assistance Program

OPTIONAL SERVICE PROGRAMS

- Counselling Service Program (Personal & Family)
- Emergency Assistance Program
- Community Social Service Activities Program
- Consumer Representation Program
- Community Life Program
- Social Service System Development

1/ Outreach Services are a method rather than a program and can be incorporated in each of the essential service programs where appropriate.

Figure 4-8

(f) General Information/Assistance (optional).

(2) Financial Planning and Assistance Service Program. This program also consists of minimum essential and optional services. These services will normally be performed by assigned staff; however, volunteers possessing the necessary qualifications may be utilized. These services are designed to ease administrative burdens of the commander; improve credit, reliability and reputation of servicemembers; and reduce the level of indebtedness. Services in the program are:

(a) Consumer Education.

(b) AER Services (AR 930-4).

(c) Financial Planning Education.

(d) Budget Development and Planning.

(e) Debt Liquidation.

(f) Food Locker Assistance.

(g) Other loans/grants (optional) (referral to Red Cross, civilian welfare agencies, etc.).

(h) Coordination with local civilian consumer credit counselling service (optional).

(3) Relocation Service Program. A service program will be developed to provide timely and useful information, guidance, and assistance to individuals planning their move and settling in the new military community. ACS centers will not duplicate or assume responsibility for services available elsewhere on-post (such as issuing of travel orders of locating off-post housing and assigning quarters). Appropriate assistance will be provided to military sponsors who are assigned to assist new arrivals (AR 608-7). Continuity of services is enhanced through interagency coordination. There is no restriction, therefore, on collocating services to ensure their efficient integration and convenient delivery. ACS personnel, however, should not be assigned administrative duties that will detract from their primary objective of eliminating disruptive influences for personnel during the moving process and while settling into the new community. The services in this program are both essential and optional as follows:

(a) Lending Closet (equipped IAW CTAs 50-195 and 50-970 and others as applicable)

(b) Installation packet library

(c) Orientations/Briefings

(d) ACS Registration Cards

(e) Installation Fact Sheets

(f) Welcome Packets (optional)

(4) Handicapped Dependents Assistance Services Program. Services in this program are essential and optional as follows:

(a) Information File

(b) Staff Coordination (w/CHAMPUS officers)

(c) Placement Assistance

(d) Referral Assistance

(e) Special Programs (e.g., recreational) (optional)

(5) Outreach Services (this is a method and can be incorporated in any of the other essential service programs).

(a) Information and assistance

(b) Welcome Visits (optional)

(c) Welcome Packets (optional)

(d) Assistance to Isolated/Separated Dependents (optional)

(e) Community Life Program Activities (optional)

(6) Child Support Services Program.

(a) Child Care Center

(b) Child Advocacy

e. Optional Service Program. Services in this program are not essential to the conduct of an ACS Program as defined herein, but arise out of local requirements and are determined desirable by the installation commander. Establishment of these services will not detract from the provision of essential services and they must contribute to the social welfare of servicemembers and their dependents. Services included in this program are:

(1) Counseling Program. These services will be offered when they are not available elsewhere in the military and civilian community or if utilization of services in the civilian community is prohibitive (i.e., cost, distance, etc.). If offered, these services will be administered by qualified personnel (e.g., social worker). Types of counseling services are individual, marital, family, group and crisis intervention.

(2) Emergency Assistance Program. Services in this program may be provided consistent with available resources. They are primarily in support of other agencies who have primary responsibility for emergency assistance (e.g., Red Cross). Some of these services are:

(a) Food Stamp Assistance

(b) Clothing/Shelter and Transportation.

(3) Community Social Service Activities. Services in this area may consist of coordination with local, health welfare and planning agencies; consultation to local health, welfare planning agencies; and Social Service Program Advocacy. These services are normally administered by professional personnel.

(4) Human Resources Council/Installation Social Service System Development. ACS personnel will participate in the installation Human Resources Council, where one exists, and will provide advice/assistance in the development of an installation social service system. This advice/assistance can be in the form of consultation, research, analysis and coordination. If no large council exists, an ACS council will be formed. Suggested make up is at Figure 4-9.

(5) Consumer Representation Program. ACS personnel will support the installation consumer representation program through the provision of expertise in organizing an effective program and/or performing studies and/or analyses of the social impact of federal or state legislation and making recommendations to the local commander.

(6) Consumer Arbitration Activities. ACS personnel will provide support to various installation activities/councils organized to perform consumer arbitration between servicemembers and local community businessmen. This support can take the form of assistance/advice on cases for which ACS personnel have direct knowledge; provision of direct assistance to the servicemember in his capacity as a consumer; and referral to appropriate military/civilian activities organized to arbitrate consumer/provider differences.

5. Model ACS Program.

a. A model ACS Program which can be tailored to the needs of a military community and resources available to the installation commanders

SUGGESTED ACS COUNCIL

ACS Officer

Deputy Commander (Other Commanders)

G1/DPCA

G4/DIO

Adjutant General

Recreation Services

Command Sergeant Major

Staff Judge Advocate

DMEDA (Health Services)

Public Affairs Officer

Housing Officer

Alcohol & Drug Abuse Control

Chaplain

DFAE

Credit Union Board Member

Bank Liaison Officer

Volunteer Corps Representative

Red Cross

RR/EEO

Provost Marshall

Enlisted Personnel

Other Program/Activity Directors as required.

is at Figure 4-10. It incorporates and/or was developed using the elements that have been discussed throughout this report. A recap of those elements follows:

- (1) Classification of clientele
- (2) Classification of environments
- (3) Categorization of services into essential and optional service programs
- (4) Organization and duties of ACS personnel

b. Three types of programs have been defined to cover the environments in which an ACS Program must operate. These programs listed in Figure 4-10 are as follows:

(1) Class A Program: has a full time staff (staff IAW DA PAM 570-551); a volunteer corps; and provides all services categorized as essential.

(2) Class B Program: has ACS officer as an additional duty; has a volunteer corps; and provides those essential services within resource capabilities.

(3) Class C Program: has ACS officer assigned as a point of contact to provide minimum information about the installation program.

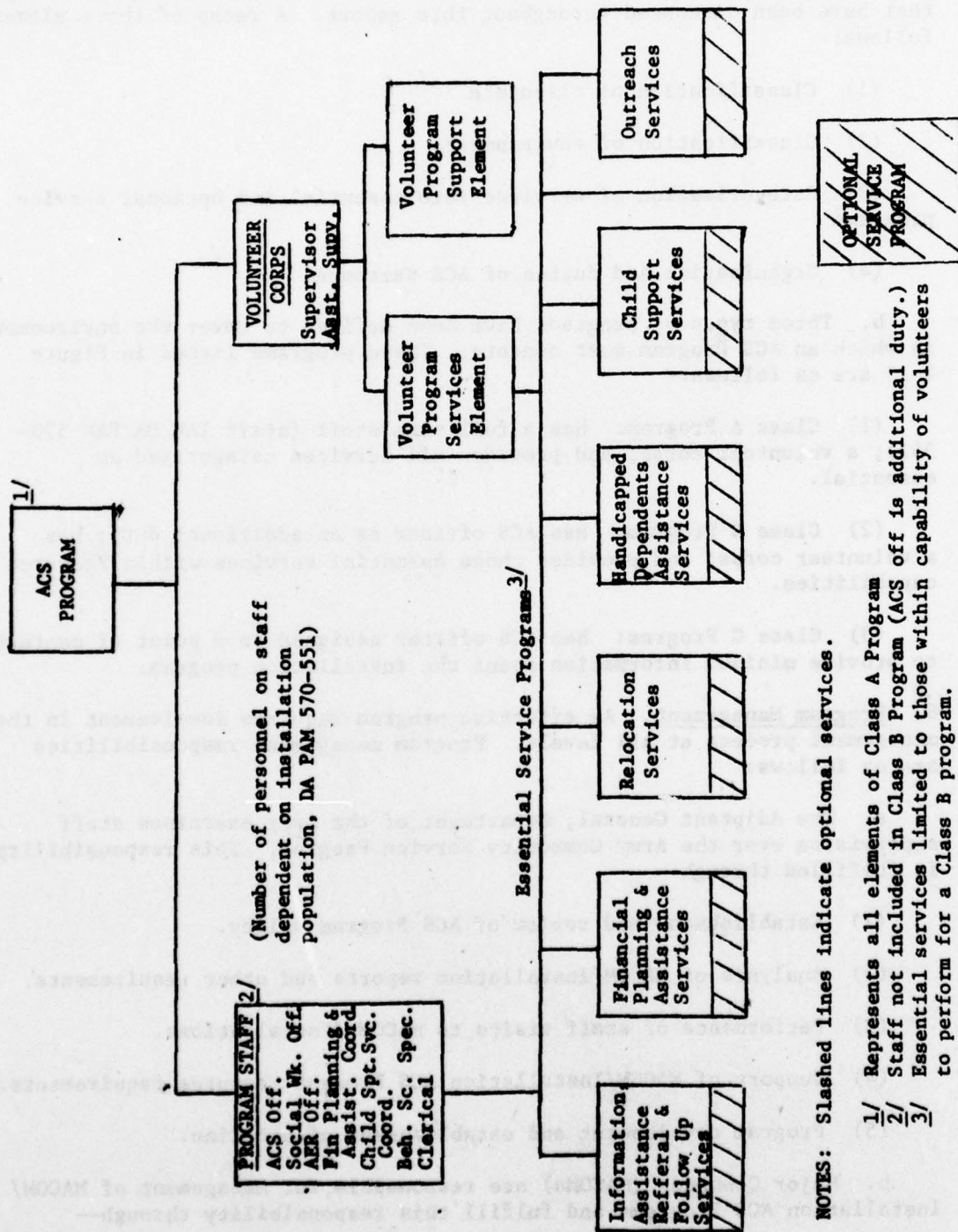
6. Program Management. An effective program requires involvement in the management process at all levels. Program management responsibilities are as follows:

a. The Adjutant General, Department of the Army exercises staff supervision over the Army Community Service Program. This responsibility is fulfilled through--

- (1) Establishment and review of ACS Program policy.
- (2) Analysis of MACOM/Installation reports and other requirements.
- (3) Performance of staff visits to MACOMs/Installations.
- (4) Support of MACOM/Installation ACS Program resource requirements.
- (5) Program development and establishment of doctrine.

b. Major Commands (MACOMs) are responsible for management of MACOM/Installation ACS Programs and fulfill this responsibility through--

MODEL ARMY COMMUNITY SERVICE PROGRAM



NOTES: Slashed lines indicate optional services.

1/ Represents all elements of Class A Program

2/ Staff not included in Class B Program (ACS off is additional duty.)

3/ Essential services limited to those within capability of volunteers to perform for a Class B program.

Figure 4-10

- (1) Management of the MACOM ACS Program.
- (2) Provision of ACS Program reports and resource requirements to HQDA.
- (3) Analysis of installation reports and other requirements.
- (4) Performance of staff visits to installations to assess ACS Program status.
- (5) Program Development.
- (6) Allocation of ACS Program resources to installations.
- (7) Provision of consultation to installations.

c. Installation commanders are responsible for the management of the installation ACS Program and will fulfill this responsibility through--

- (1) Allocation of adequate resources to the installation ACS Program.
- (2) Identification of community needs and resource requirements.
- (3) Provision of Installation ACS Program report and resource requirements to MACOM.
- (4) Program development.

d. The ACS officer is responsible for the operation of the ACS Program and will fulfill this responsibility through--

- (1) Effective utilization of resources allocated to the installation ACS Program.
- (2) Identification and reporting of community needs and program resource requirements to the installation commander.
- (3) Provision of the installation ACS Program report to the installation commander.

7. Funding and Reporting.

a. Funding for all programs designated as essential must be provided by HQDA. Funds for optional programs implemented by installation commanders must be provided within locally available resources. The ACS Program is an appropriated fund activity, supplemented by NAF.

b. Accurate and timely reporting is essential for effective utilization of data reported for both program management and funding. Program reports are currently submitted annually and produce some meaningless data due to the construction of the current report form (Annex L). A revised report should be submitted semiannually and should contain the following data elements as a minimum:

- (1) Number of services provided per categories.
- (2) Man hours expended in deliveries of services.
- (3) Categories of personnel served.
- (4) Size of military community served.
- (5) Number and types of personnel on ACS staff.
- (6) Status of personnel on staff (i.e., authorized, special duty, etc.).
- (7) Number of volunteers and volunteer hours expended.
- (8) Operating cost by type of funds and element of expense.
- (9) Type of program by classification.
- (10) Problems encountered.

SECTION V

CONCLUSIONS

1. The ACS Program is a community-oriented, social service program and as such is designed to assist the commander by identifying emerging social problems and to assist servicemembers and their dependents by developing personalized services to prevent and/or resolve these problems. The welfare of the servicemember is the responsibility of the commander and no service agency can assume this responsibility.

2. The current ACS Program is poorly defined and loosely structured and as such is subject to broad interpretation at installation level. The support provided and services offered by current ACS Programs are dependent on command emphasis received and resources allocated. There is a need to standardize the ACS Program: in order to better define the number and type of services to be provided; to identify the type of personnel required to effectively administer these services; and to be able to respond to the changing needs of the military community in many and varied environments.

3. Management responsibilities for the ACS Program at all levels need to be better delineated and expanded. This is reflected in lack of involvement of ACS personnel in the budget process and irregularities and inconsistencies in preparation and submission of reports.

SECTION VI

RECOMMENDATIONS

1. Recommend that the ACS Program be revised to incorporate the concept outlined in Sections III and IV of this report as follows:

- a. Categorization of services as essential or optional.
- b. Redesign of permanent staff organization and volunteer corps structure.
- c. Specific delineation of responsibilities for program management (to include funding and reporting) at all levels.

2. Recommend that an ACS Program evaluation plan be developed as a followon to the study effort. Revised program will be evaluated at approximately 8-12 months after implementation.

ANNEX A



DAAG-PLM

DEPARTMENT OF THE ARMY
OFFICE OF THE ADJUTANT GENERAL AND THE ADJUTANT GENERAL CENTER
WASHINGTON, D.C. 20314

7 FEB 1977

**MEMORANDUM FOR: CHIEF, MANAGEMENT DIVISION,
PLANS & OPERATIONS DIRECTORATE**

SUBJECT: Directive for Army Community Services (ACS) Study

1. **STUDY TITLE (Category).** Army Community Services (ACS) Study (Management).

2. **REFERENCES.**

a. Administrative and Procedural. AR 5-5, The Army Study System, 30 Aug 76.

b. Substantive.

(1) AR 608-1, Army Community Service Program, 1 Jun 75.

(2) AR 608-25, Retirement Services Program, 5 Aug 69.

(3) DA Pam 608-3, Consumer Affairs Handbook, 1 Jun 75.

(4) DA Pam 608-28, Handbook on Volunteers in Army Community Service, 30 Jul 71.

(5) Personal Commercial Affairs Study Report, TAGCEN, 30 May 75.

(6) Morale Support Activities Study Report, TAGCEN, 15 Jun 76.

3. **BACKGROUND.**

a. Benefits associated with military service have experienced steady erosion in recent years. One important means of at least partially compensating for an eroded benefits structure is enhancement of the quality of Army life. This is recognized in the FY 1978 Study Planning Guidance, reflecting the thoughts of the Secretary of The Army and Chief of Staff, which calls attention to the need for prompt evaluation of how activities available to the soldier might be improved.



DAAG-PLM

SUBJECT: Directive for Army Community Services (ACS) Study

b. TAG has broad responsibility for activities that support the soldier and his dependents, commonly referred to as Personal Environment Systems (PES). One of the most important PES areas is Army Community Services (ACS), representing a variety of individual services. The importance of ACS is reinforced by the growing number of junior enlisted personnel who are married, now numbering roughly half of that reference group. ACS is a prime source of assistance in time of need, and contributes to a feeling of community. The traditional essence of ACS is the theme "The Army takes care of its own."

c. The DAIG recently completed (Dec 76) an inspection of the ACS programs at Ft. Ord, Ft. Lewis, Ft. Jackson, Ft. Hood, Ft. Sill, Presidio, Sacramento Army Depot and Hawaii. Findings indicated that, while the overall program is a good one, it suffers from lack of standardization and uniformly effective management. Services are not fully defined, a uniform training program for all personnel does not exist, and installation personnel charged with directly managing ACS activities frequently lack knowledge of basic budgetary practices.

d. DAIG findings are supported by preliminary evaluation of the ACS program within TAGCEN. Services vary widely between installations based on reports submitted. Some programs are extremely comprehensive, while others are quite limited. Funding levels also fluctuate widely, and reflect irregular patterns in relation to population served. Some installations have no ACS program per se, even though the program is technically required when population density exceeds 2,000 military personnel. Commanders do not have a clear picture of services that should be provided, or how they should be organized. For the same reason, soldiers do not have a clear conception of services available. Oversight of ACS by TAGCEN is imprecise, erratic, and based on infrequent (currently annual) reporting. There have been infrequent field visitations to evaluate the degree to which ACS actually services the soldier. Overall analysis suggests a need for improvement. Preliminary analysis indicates that only about one manyear of effort is being assigned to this important program within TAGCEN.

e. To be productive, any study of the ACS area should concentrate on basics--what is needed, and how best to provide it. Among the basic issues identified for address during the course of this study are:

- (1) What should properly be encompassed by ACS.
- (2) Actual funding requirements in relation to funding patterns.

DAAG-PLM

SUBJECT: Directive for Army Community Services (ACS) Study

- (3) Types of personnel needed to manage and administer ACS programs in the field, including job descriptions.
- (4) How best to attract and utilize volunteers.
- (5) Services that need to be provided to disparate clientele groups (age, rank, marital status, on-post versus off-post residency) in various geographic locales (overseas versus CONUS, isolated post versus installation located in a major city, etc.).
- (6) Relationship between ACS programs and what is commonly available in local community.
- (7) What specific services should be encompassed by various modules, and how to structure module in relation to clientele.
- (8) Structure of an overall ACS model (composed of modules).
- (9) Appropriateness of colocating ACS with other activities that service the soldier (e.g. Recreation Center, AER, American Red Cross) under what might be termed an "Army Community Center."
- (10) How best to promote the ACS program.
- (11) Degree of central monitorship required by TAGCEN, form it should take, and determination of associated resource requirements.
- (12) What the specific objectives of ACS should be, and means of measuring performance and quality of service provided.
- (13) How best to test a model ACS program in the field.
- (14) Actions required to implement a comprehensive ACS program, including generation of DA Pamphlets covering individual ACS modules.

4. LITERATURE SEARCH.

a. Documentation maintained by organizations having interest in the subject matter of the study.

- (1) Morale Support Directorate.
- (2) Personal Affairs Directorate.
- (3) PES Management Office.

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SUBJECT: Directive for Army Community Services (ACS) Study

b. Studies related to this issue.

(1) Personal Commercial Affairs Study, TAGCEN, 30 May 75.

(2) Morale Support Activities Study, TAGCEN, 15 Jun 76.

5. STUDY SPONSOR. The Adjutant's General Office.

6. STUDY AGENCY. Management Division, Plans and Operations Directorate, TAGCEN.

7. TERMS OF REFERENCE.

a. Problem. More direction needs to be given to the Army Community Service Program in terms of publicity (i.e., education of commander and clientele), standardization and support. The ACS program is not clearly understood by all commanders and clientele, the elements/terms and scope of ACS are not clearly defined or standardized; and ACS support personnel (volunteers included) are not thoroughly trained in the operation and administration--especially budget requirements--of an ACS program.

b. Purpose. To develop standard modules (e.g., personal commercial affairs module) to be integrated into a model ACS program. To develop guidelines for program implementation and operation. The definition of each module and procedures for implementation (with variations) will be documented in appropriate pamphlets and regulations intended to publicize and standardize the resultant services to be provided.

c. Objectives. The overall objective of this study is to develop policies, standards and procedures for the Army Community Service Program with a view toward improving service and increasing program efficiency. Sub-objectives are:

(1) Objective 1: To define the elements/terms of ACS and categorize them as essential or optional services.

(2) Objective 2: To categorize services into distinct modules based on clientele to be served, the type environment in which services are to be provided, and the need for those services.

(3) Objective 3: To integrate these modules into an ACS model (with variations) and provide instructions for the implementation and operation of an ACS program. Funding requirements will be considered here.

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(4) Objective 4: To define the duties of, training requirements for, and organization of ACS support personnel.

(5) Objective 5: To test and evaluate the model ACS program along with its implementing and operating instructions. The Army Community Center concept will be considered.

d. Scope. This study will be limited to:

Army Community Service Program as administered by the Community Services Division, Morale Support Directorate; Administration of the Army Emergency Relief and American National Red Cross Programs by ACS personnel at installation level; retirement services provided at installation level; and Dependent Youth Activities.

e. Limitations.

(1) Those areas within the category of Welfare and Morale that are the responsibility of the Director, Human Resources Development, ODCSPER will not be studied but will be considered in evaluating overall delivery systems.

(2) Retirement services provided above installation level are not to be addressed in this study.

f. Time Frame. This study will be conducted during the 2d and 3d Quarters of FY 1977 and will be completed by Jan 78 (30 Jun 77 if field test is not considered part of formal study).

g. Assumptions.

(1) The current erosion of military benefits will continue or at best maintain a steady state.

(2) Junior enlisted personnel, particularly those who are married, are in the greatest need of the type services an effective ACS program can provide.

(3) A well publicized, efficiently run ACS program can materially assist in improving the image of the Army and increase morale of the clientele served.

(4) A quality ACS program can assist in inducing personnel to reenlist.

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(5) Funding and personnel will not increase.

h. Essential Elements of Analysis (EEA).

(1) What are the elements of ACS? (Objective 1)

(2) Which of these elements are essential and should be provided in every ACS program? (Objective 1)

(3) Which elements should be considered optional based on local environment and needs? (Objective 1)

(4) What is the involvement of ACS personnel in the administration of local AER and Red Cross programs? Retirement services? (Objective 1)

(5) Can AER and Red Cross programs be pulled under the same umbrella with ACS? Dependent Youth Activities, Child Care? (Objective 2)

(6) How many and what kinds of modules should be developed for essential ACS? (Objective 2)

(7) What categories of modules should be developed for optional ACS? (Objective 2)

(8) What are the categories of clientele served by ACS? (Objective 2)

(9) Which category of clientele is the biggest user of essential ACS? Optional ACS? (Objective 2)

(10) What are the different types of environments in which ACS must operate? (Objective 2)

(11) What is the ideal ACS model and why? (Objective 3)

(12) What are the different variations/options that should be made available? What are the funding requirements? (Objective 3)

(13) What are the legal constraints involved with ACS personnel and volunteers administering AER and Red Cross programs? (Objective 4)

(14) What are the ACS personnel support requirements (numbers and types) required to efficiently administer an ACS program at an installation? (Objective 4)

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(15) What are the duties of ACS personnel? What should they be? (Objective 4)

(16) What are the training requirements for ACS personnel? ACS volunteers? (Objective 4)

(17) What are the legal constraints for ACS volunteers? (Objective 4)

(18) What type individual should be the ACS officer? (e.g. military, civilian, retiree). (Objective 4)

(19) Test and evaluate model ACS program. (Objective 5)

(a) What are advantages and disadvantages of model?

(b) Are implementing and operating instructions clear?

(c) Can model be adopted for use by ACS personnel in all types of environments?

i. Models. To be determined.

j. Environment. The current peacetime environment of the Army community will be used. This environment is manifested by a climate of concern as a result of the erosion of military benefits.

k. Methodology. This study will be conducted in four phases as follows:

(1) PHASE I - DATA COLLECTION. During this phase data will be collected through survey(s); the conduct of personal interviews; the conduct of staff visits to selected installations with varying ACS programs (based upon the type clientele served and the environmental conditions which govern the type services offered); and the administrative review of existing regulations, policies, pamphlets and studies which relate to the conduct of ACS programs.

(2) PHASE II - DATA EVALUATION. In this phase the data collected in Phase I will be analyzed to categorize the type of ACS services provided into essential versus optional; to determine the various categories of clientele served; to determine the level of training of ACS personnel; to categorize the different types of environments in which ACS programs must operate and to determine data requirements to manage the program.

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(3) PHASE III - MODULE/MODEL DEVELOPMENT. During this phase, the results of the analysis performed in Phase II will be utilized to develop individual modules which can then be integrated into a flexible ACS model program. The duties and organization of ACS personnel will be developed. The program to be implemented at a particular installation would be dependent on the local environment and type of clientele served. Upon completion of this phase, TAG will be briefed on results to date and a recommendation will be made as to whether or not Phase IV needs to be implemented and/or whether the study should be formally concluded.

(4) PHASE IV - MODEL TEST AND EVALUATION. During this phase the model ACS program along with implementing and operational directives will be tested at a selected site. Resultant recommendations will be analyzed to produce the model ACS program. The staffed regulation and pamphlets will then be finalized for subsequent distribution and implementation.

8. RESPONSIBILITIES.

a. Management Division, Plans and Operations Directorate, TAGCEN will provide a study officer who is responsible for the conduct of the study.

b. Morale Support Directorate, TAGCEN will provide information, documentation, reports and other assistance as is necessary for the conduct of the study.

c. Personal Affairs Directorate, TAGCEN will provide information, documentation and other assistance as may be necessary for the conduct of the study.

d. PES Management Office, TAGCEN will provide information, documentation and other assistance as may be necessary for the conduct of the study.

e. Comptroller will provide assistance during program funding analysis portion of study.

9. ADMINISTRATION.

a. Support.

(1) Comptroller will make necessary TDY funds (Para 9a(3)) available.

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(2) Management Division, Plans and Operations Directorate will provide clerical support (Para 9a(3)).

(3) Study Costs (Personnel, TDY, Supplies).

(a) Personnel:

1 off (04) Study Officer 5 man-months (part time)

1 civ (GS-05) Clerk-Typist 1 man-month (part time)

(b) TDY/Per Diem \$1500.00 (approx.).

(c) Supplies (paper, charts, etc.) \$200.00.

b. Milestone schedule. (See Incl 2)

Starting date: 24 Jan 77

Ending date: Jan 78*

IPR-end Phase II: 4 May 77

IPR-end Phase III: 6 Jun 77

Final Brief-end Phase IV: Jan 78

*Includes six month field test if required.

c. Control procedures.

(1) Study Manager - Chief, Management Division, Plans and Operations Directorate.

(2) DD Form 1498 prepared and submitted by Study Team Leader in coordination with TAGO study coordinator.

(3) Action documents.

(a) Revision of: AR 608-1, AR 608-25 (if required), DA Pam 608-28.

(b) Development of new pamphlets as determined after Phase II.

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(c) Development of training package for ACS personnel and volunteers.



PAUL T. SMITH

Major General, USA

The Adjutant General

2 Incl

1. Event List

2. Milestone Schedule

EVENT LIST

<u>Event Number</u>	<u>DESCRIPTION</u>
	PHASE I - DATA COLLECTION
1.	Request documentation, information and reports on current ACS program from Morale Support Directorate.
2.	Prepare and disseminate ACS officer survey.
3.	Coordinate with Air Force/Navy for pertinent studies, directives and related research data on community services.
4.	Complete requests for information (MILESTONE #1). (2 Feb 77)
5.	Coordinate staff visit to Ft. Belvoir/local community center.
6.	Coordinate staff visit to Ft. Myer.
7.	Coordinate staff visit to Bolling AFB/Andrews AFB.
8.	Coordinate field trip to Ft. Hood/local community center.
9.	Coordinate field trip to Ft. Carson.
10.	Coordinate field trip to Ft. Sill/local community center.
11.	Coordinate meeting with TAGCEN, DARCOM, TRADOC and FORSCOM ACS officers.
12.	Complete data collection coordination (MILESTONE #2). (11 Feb 77)
13.	Receive documentation, information and reports from Morale Support Directorate.
14.	Receive pertinent studies, directives and related data from Air Force/Navy.
15.	Target date for receipt of all required data (includes survey responses) (MILESTONE #3). (18 Mar 77)
16.	Conduct staff visit to Ft. Belvoir.
17.	Conduct staff visit to Ft. Myer.
18.	Conduct staff visit to Bolling AFB/Andrews AFB.

19. Conduct staff visit to Ft. Hood.
20. Conduct staff visit to Ft. Carson.
21. Conduct staff visit to Ft. Sill.
22. Conduct staff visit to USAREUR, if required.
23. Conduct interview of TAGCEN, DARCOM, TRADOC and FORSCOM ACS officers.
24. End Phase I: Consolidate data (MILESTONE #4). (31 Mar 77)

PHASE II - DATA EVALUATION

25. Evaluation of existing regulations, directives, studies, reports and other related research data.
26. Evaluation of trip reports for all staff visits conducted (events 16-22).
27. Evaluation of interview of TAGCEN, DARCOM, TRADOC, and FORSCOM ACS officers.
28. Complete data evaluation for Phase II, IPR (MILESTONE #5). (4 May 77)

PHASE III - MODULE/MODEL DEVELOPMENT

29. Develop individual ACS modules tailored to needs, clientele to be served and environmental situation based on evaluation results.
30. Integrate modules into model ACS program.
31. Develop test requirement for model ACS program.
32. Develop duties of and training requirements for ACS personnel and volunteers.
33. Develop implementation and operational instructions for model ACS program.
34. Prepare test package for model ACS program.

35. Complete Phase III (MILESTONE #6). (31 May 77)

36. Conduct IPR (MILESTONE #7). (6 Jun 77)

PHASE IV - MODEL TEST AND EVALUATION

37. Test and Evaluate proposed model for flexibility under varying conditions and satisfaction of clientele needs.

38. Evaluate recommendations/comments.

39. Based on results modify ACS model program accordingly.

40. Make final recommendations for proposed ACS model program (MILESTONE #8). (Jan 78) End Phase IV.

41. Complete ACS study report (MILESTONE #9). (30 Jun 77 or 30 Jan 78*)

*Dependent upon decision(s) made at IPR at end of Phase III.

MILESTONE SCHEDULE

<u>Milestone/Date</u>	<u>Description</u>
	PHASE I - DATA COLLECTION
1. (2 Feb 77)	Complete requests for documentation, studies, directives and related research data (event 4).
2. (11 Feb 77)	Complete data collection coordination (event 12).
3. (18 Mar 77)	Completion date for receipt of data including survey results (event 15).
4. (31 Mar 77)	Complete Phase I - (event 24)

OUTPUTS

Trip Report #1 - Ft. Belvoir

Trip Report #2 - Ft. Myer

Trip Report #3 - Bolling/Andrews AFB

Trip Report #4 - Ft. Hood

Trip Report #5 - Ft. Carson

Trip Report #6 - Ft. Sill

Trip Report #7 - USAREUR (if required)

Interview Summary - ACS officers TAGCEN, TRADOC, FORSCOM, DARCOM ACS officer survey responses.

PHASE II - DATA EVALUATION

5. (4 May 77) Complete Phase II, conduct IPR (event 28).

OUTPUTS - Trip report, survey & interview analysis, status bfg.

PHASE III - MODULE/MODEL DEVELOPMENT

6. (31 May 77) Complete Phase III (event 35).
7. (6 Jun 77) Conduct IPR (event 36).

OUTPUT - Status briefing

PHASE IV - MODEL TEST AND EVALUATION

8. (Jan 78)

Complete Phase IV (event 40) and present recommendations on model ACS program.

OUTPUTS

Final Briefing

Study Report

Implementing Directives

Operational Instructions

ANNEX B

DAAG-PLM

7 March 1977

MEMORANDUM FOR RECORD

SUBJECT: Staff Visit, ACS Center, Ft. Myer, VA

1. General. The undersigned conducted a staff visit to the Army Community Service (ACS) Center, Ft. Myer, VA on 15 February 1977. Purpose of this visit was to collect information/data to be utilized in the conduct of the study of the Army Community Service Program. Personnel interviewed were MAJ Dingey, ACS officer for MDW and Ft. Myer and MSG Knauss, NCOIC.

2. Organization.

a. This ACS program, run out of Ft. Myer, provides services to the Army community of the Military District of Washington (MDW). Locations from which these services are provided include, the Pentagon, Ft. McNair and the Forrestal Building.

b. The ACS officer (MAJ) is the chief of the Human Resources/Community Services Division and works for the MDW DCSPER. Other permanent ACS support personnel include the AER officer (CPT), NCOIC (E-8), 3 NCOs (E-7), a Social Worker (GS-11), a Financial Counselor (GS-07), an Accounts Clerk (GS-05) and a Secretary (GS-05). There is a volunteer coordinator and a strong corps of volunteers.

3. Services.

a. The basic services provided by this center are Welcoming/Reception, Information and Referral, Family Counselling, Financial Counselling, Loan Closet, Food Closet and Handicapped Dependents Program.

b. Other services provided are quite extensive and are primarily performed under the direction of the volunteer supervisor. Child Care (nursery) is not provided by nor is it a part of ACS.

c. The center's counselling program is quite comprehensive and there is very close coordination/cooperation between ACS personnel and the local community, Red Cross, Chaplain, Mental Hygiene and Race Relations/Equal Opportunity personnel.

4. Problems.


a. The ACS staff currently perceives a problem with publicity for the ACS program. They are not currently co-located with the welcome center (one stop in-processing) and do not get many new arrivals in-processing through the center. They feel this should be a mandatory stop.

DAAG-PLM

SUBJECT: Staff Visit, ACS Center, Ft. Myer, VA

b. The ACS staff has encountered a problem concerning the legality of volunteers providing transportation to off-post dependents. This is currently being staffed with the MDW SJA.

5. Conclusions. The MDW ACS program is quite comprehensive and is receiving much command support/emphasis. Some of the problems encountered here will be resolved by the ACS study.


JOSEPH F. GORECKI
MAJ, GS
ACS Study Officer

ANNEX C

DAAG-PLM

7 March 1977

MEMORANDUM FOR RECORD

SUBJECT: Staff Visit, ACS Center, Ft. Belvoir, VA

1. General. The undersigned conducted a staff visit to the Army Community Service (ACS) Center, Ft. Belvoir, VA on 17 February 1977. Purpose of this visit was to collect information/data to be utilized in the conduct of the study of the Army Community Service Program. Interview was held with CPT Sanner, installation ACS officer.

2. Organization.

a. The ACS officer (CPT) is currently carried as excess with the recent assignment of a Social Work officer (LT) to the staff. The Social Work officer performs the AER function as an additional duty. Also assigned are two Behavioral Science Specialists (E-5) and an administrative aid (GS-05). There is also a very active volunteer program.

b. The ACS branch is a sub element of the Human Resources Division which is under the DPCA. Other branches within this division are, Red Cross, RR/EEO, Education and Alcohol & Drug Control.

3. Services.

a. The basic services provided by this center are: Welcoming/Reception, Information & Referral, Financial Counselling, Family Counselling, AER loans, Loan Closet and Food locker.

b. Additionally, the volunteers publish a monthly bulletin and staff a desk in the post Central Processing Center to hand out welcome packets. The Social Work officer is also developing a baby sitting course and is establishing ties with local community counselling agencies.

4. Problems.

a. The current facility was not occupied during the energy crisis and the climate inside, year round, leaves much to be desired.

b. Although the ACS staff is very active and enthusiastic, the size of the permanent staff is not adequate considering the size of the community to be served.

DAAG-PLM

SUBJECT: Staff Visit, ACS Center, Ft. Belvoir, VA

5. Conclusions. The Ft. Belvoir ACS program is a good program which could be outstanding with more permanent resources.

Joseph F. Gorecki
JOSEPH F. GORECKI
MAJ, GS
ACS Study Officer

ANNEX D

DAAG-PLM

11 March 1977

MEMORANDUM FOR RECORD:

SUBJECT: Staff Visit, ACS Center, Ft Carson, CO

1. General. The undersigned visited the Army Community Service Center, Ft Carson, CO on 7-8 March 1977. Purpose of the visit was to collect information/data to be utilized in the conduct of the ACS study. Personnel interviewed were MAJ Woodbury, Deputy DPCA, Mr. Mitchell, ACSC director, MAJ Richardson, Chief HRD, and Mrs. Fisher, volunteer coordinator.

2. Organization. The Army Community Service program at Ft Carson is under the supervision of the Chief, Human Resources Division, Director of Personnel and Community Activities. There are eight TDA, ten special duty and one NAF employee assigned to perform ACS functions. This staff is supported by a volunteer corps of from 85-100 volunteers. The ACS officer is also the director of the ACS center a central one-stop location which houses some of the following activities including ACS: Red Cross, Chaplain Liaison, Central Clearance, Retired Activities, AG/Finance In-out Processing, Family Housing, ID Cards, Vehicle Registration/Clearance, transfer point, and probation/LEC.

3. Services.

a. Services provided by ACS personnel include: budget counseling and consumer education; family counseling; loan closet/used furniture; HELP office; information and referral; and a myriad of volunteer committees.

b. Family counseling is tied in with community counseling services (MEDDAC personnel, psychiatry) and is provided from the ACS center.

c. The HELP office in addition to hotline service also administers the food locker and screens personnel eligible for food stamps.

d. Personnel from ACS also participate in the Ft Carson Human Services Coordinating Council which meets twice a month.

4. Summary.


a. Ft Carson has a very comprehensive Human Services program which is both preventative and remedial in nature. The ACS officer's role as director of the ACS Center provides maximum visibility to the ACS program and as a result resources for ACS are plentiful.

DAAG-PLM

SUBJECT: Staff Visit, ACS Center, Ft Carson, CO

b. ACS provides only volunteers for the nursery. It is under the Personnel Services Division.

c. Ft Carson did not establish a handicapped dependents program since there are adequate facilities in the area. They publish a booklet outlining services available.


JOSEPH F. GORECKI
MAJ, GS
ACS Study Officer

ANNEX E


DAAG-PLM

25 March 1977

MEMORANDUM FOR RECORD

SUBJECT: Staff Visit, ACS Center, Ft. Hood, TX

1. General. The undersigned conducted a staff visit to the Army Community Service Center, III Corps & Fort Hood, Texas on 22-23 Mar 77. Purpose of the visit was to gather information/data to be utilized in the conduct of the study of the Army Community Service Program. Personnel visited were the III Corps G-1, COL Arnet; Chief, Personnel Services Division; LTC Schiemann; ACS Officer, Mr. Smith; AER officer, CPT Snow; Social Work Officer, CPT Eads; and Social Services Representative, Mrs. Bohannon.
2. Organization. The Army Community Service Program is under the general supervision of the Chief, PSD subelement of the G1/DPCA. The ACS staff consists of an ACS officer (GS-11), Social Work officer (CPT), AER officer (CPT), Admin NCO (SSG), two Social Service Representatives, an AER clerk and a secretary. There is a strong volunteer corps with a monthly average strength of 120 volunteers to run a myriad of programs.
3. Services.
 - a. Basic services provided by this center include information and referral, loan closet, food locker, budget counseling, debt liquidation, AER, and family counseling.
 - b. Additionally, ACS volunteers staff a desk in the community center and provide a variety of committees to include an excellent child care/development center. The ACS officer is also responsible for the post nursery.
4. Problem. Lack of stability of key personnel (e.g., AER officer, Admin NCO) has caused some problems in workload distribution.
5. Summary. This ACS program is well organized and expertly supervised. The program receives a high degree of command emphasis and as a result ACS at Ft. Hood is a valuable service organization.


JOSEPH F. GORECKI
MAJ, GS
ACS Study Officer

ANNEX F


DAAG-PLM

10 March 1977

MEMORANDUM FOR RECORD

SUBJECT: Staff Visit, Personal Affairs Unit, Bolling Air Force Base, MD

1. General. The undersigned conducted a staff visit to the Personal Affairs Unit, Bolling Air Force Base, MD on 3 Mar 77. Purpose of visit was to gather information/data on the Air Force Family Service Program for use in the conduct of the study of the Army Community Service Program. Individual interviewed was SSGT Mary F. Austin, Chief, Personal Affairs Section.
2. Organization. The Personal Affairs Section is one element of the Consolidated Base Personnel Office (CBPO), a subelement of the Personnel Division. This section has a permanent staff of seven military and has responsibility for twenty seven separate areas, including the Family Services Program. The volunteer program is very structured and regulated.
3. Services. Administration of the Family Services Program is one of the responsibilities of the Personal Affairs Section. This program consists of information, referral and assistance and is provided primarily by volunteers. Many of the other services provided by ACS programs are the function of the Personal Affairs Section separate from the Family Services Program.
4. Summary. The Air Force Family Service Program is structured to provide the basic services of information, guidance and referral. These services are supervised by the Personal Affairs officer and are performed primarily by volunteers.


JOSEPH F. GORECKI
MAJ, GS
ACS Study Officer

ANNEX G

DAAG-PLM

9 March 1977

MEMORANDUM FOR RECORD

SUBJECT: Staff Visit, Family Services Section, Bureau of Naval Personnel,
USN, Arlington Annex, VA

1. General. The undersigned conducted a staff visit to the Family Services Section, Bureau of Naval Personnel, Arlington Annex, VA on 16 Feb 77. Purpose of this visit was to collect information/data on the operation of the Navy's equivalent of ACS to be utilized in the conduct of the study of the Army Community Service Program. Individual interviewed was LT. Walt Patteson, Head, Family Services Section.


2. Organization. The Navy Personal Services Program is administered through a consolidated facility under the direction of a Personal Services officer. In most cases this is performed as an additional duty. The Personal Services Officer is to be assisted by a Personal Services Director (civilian) and 1-3 assistants (civilian). Whether or not these positions are filled depends upon whether or not an installation has funded for them. Very few have done so. The brunt of this program is carried by the volunteer staff.

3. Services. Typical services provided are categorized as essential or desirable.

a. Essential services are: welcome brochure; liaison with wives/military oriented organizations; volunteer program; welfare assistance; hospitality kits; waiting wives program; publicity; reference/loan library; information and referral; and resources for the handicapped.

b. Desirable functions include: employment assistance/referral; dependents personal affairs orientation; babysitter registry; summer camps for children; and want ad service.

4. Summary. The Navy Personal Services Program, although it meets the needs of Navy families, does not receive full emphasis of permanent staff since most programs are run by volunteer staff with minimal guidance. The Navy Regulation (OPNAVINST 1740.1A) governing establishment and operation of Personnel Service Centers is currently being reworked. Provisions will be included for mandatory staffing which should in turn promote additional emphasis on the program.


JOSEPH F. GORECKI
MAJ, GS
ACS Study Officer

ANNEX H

The following services are available to clients of Fairfax County. Please consult your social worker if you are in need of any of these services.

* Purchaseable effective July 1, 1976.

ADOPTION SERVICES

The combined social and legal processes which enable children, who should be or have been legally and permanently separated from their natural parents for their own well being, to become members of a new family unit.

*

ALCOHOL COUNSELLING AND TREATMENT

Identification of problems relating to alcohol abuse, counselling with the individual and his family; provision of rehabilitation and social and vocational adjustment services.

*

CHORE SERVICES

Performance of low skilled/semi-skilled home management tasks consisting of house-keeping activities, house cleaning, household laundry and ironing, floor maintenance, window washing, preparation of meals, care of household equipment, outdoor work, and house repair if the home is owned.

*

COMPANION SERVICES

Provision of personal aid and particularized care by an authorized person to an individual who, because of advanced age, disability or infirmity, is unable to care for himself without assistance and has no one to provide such aid and care without cost.

CONGREGATE MEALS

Provision to the blind, the aged, or disabled individual a maximum of two meals a day and opportunities for nutrition, education, fellowship and recreation in an approved group setting.

COURT SERVICES

Services are limited to investigation and report when requested by the court in cases of domestic relations or child custody when such requests are not for purposes of protection of the child/adult, adoption, guardianship/committee appointment or legal aid services.

COUNSELING

Provisional guidance, consultation and problem solving interaction in marital and family relationships, personal adjustment, single parenthood, etc.

*

DAY CARE TO ADULTS

Services provided for a defined portion of the 24 hour day as a supplement for family care in a protective setting approved by the State agency for purpose of personal attention, care and supervision.

* DAY CARE TO ADULTS --DEVELOPMENTAL

Provision of training and instruction for mentally retarded/developmentally disabled adults in a direct care program which is less than 24 hours per day in accordance with standards established by the Department of Mental Health and Mental Retardation.

* DAY CARE TO CHILDREN

Day care service is defined as direct care provided to children by approved providers for a defined portion of a 24 hour day.

DRUG COUNSELING & TREATMENT

Identification of problems, counseling with the individual and his family; provision of rehabilitative, social, vocational, and adjustment services.

EDUCATIONAL SERVICES

Provision for instruction or teaching below the baccalaureate level when the service is not generally available through any public agency (State & Local) without cost and without regard to income.

EMERGENCY NEEDS

Provision of advice, counseling, location of resources and referral when an individual or family has an emergency or temporary maintenance need.

* EMERGENCY SHELTER FOR CHILDREN

Immediate placement and supervision as part of protective service when removal of a child from a hazardous situation is necessary and the decision is made by any individual or agency authorized by State law to place children.

(EPSDT) EARLY & PERIODIC SCREENING, DIAGNOSIS

Provision of informational and health screening referral services, supportive social services and medical referral services for medical diagnosis and treatment.

EMPLOYMENT SERVICES

Services to individuals in securing employment, educational and/or vocational training through activities, such as, supportive counseling; referral to community resources; job search and placement; and preparation for and adjustment to work; training or education.

FAMILY PLANNING

Offer of service, prompt provision of general information, counseling, education and medical services as required to insure access to and utilization by individuals without regard to sex, race, age, marital status or parenthood, who voluntarily want to limit their family size or to space the arrival of their children.

* FOSTER CARE TO CHILDREN

Services provided to or on behalf of children in temporary substitute care who are committed or entrusted to the local board of welfare or for whom a local agency has responsibility for supervision. Services are provided to or on behalf of children with the intent of eventual return to the natural home or for adoption.

HEALTH RELATED SERVICES

Assisting an individual through counseling to identify, and understand his health needs and by referral to secure and utilize necessary medical treatment, preventive and health maintenance services, including services in medical emergencies.

HOME DELIVERED MEALS

Approved providers prepare and deliver a maximum of two meals a day to any individual who is homebound or unable to prepare his own meals because of health disability or advanced age, and has no one to provide them without costs.

* HOMEMAKER

Performance of or instruction in activities such as personal care, home management, household maintenance, nutrition consumer education, hygiene and child rearing, by a person trained in homemaking skills and supervised by an agency.

HOME MANAGEMENT

Services consist of help with household management, including areas such as household budgets, consumer buying; consumer education and protection.

HOSPITAL SOCIAL SERVICES

Services consist of direct counseling by the local agency which facilitates liaison between the individual to be hospitalized or in the hospital with his family/community and hospital staff or medical personnel.

HOUSING IMPROVEMENT

Assistance in locating housing and obtaining necessary household furnishings; working with landlords to upgrade housing; assistance in property purchase; and securing or providing for special modifications in building related to disability of occupants.

INFORMATION & REFERRAL

Provision of information about Title XX Services and other related social and financial service programs, brief assessment to facilitate referral to community resources and follow up, as appropriate.

* LEGAL SERVICES

Identification of need for legal assistance, supportive counseling, and referral for legal services; payment for legal services and related costs in accordance with standards established by the State.

MENTAL HEALTH COUNSELING AND TREATMENT

Provision to a mentally ill/emotionally disturbed or maladaptive person of services, such as, diagnostic assessment counseling, either individual or group therapy including resocialization groups, after care supervision, community resource referral, crisis intervention services, and assistance in living arrangements are included.

NUTRITION SERVICES

Provision of information, advice, and counseling about nutritional needs, meal preparation, purchasing wisely to meet daily nutritional needs.

PROTECTIVE SERVICES TO CHILDREN

Services available without regard to income to the adult 18 years of age or older consist of certain basic components for, or on behalf of an individual who is unable to protect himself without help from neglect, abuse or exploitation.

PROTECTIVE SERVICES TO ADULTS

Services to adults 18 years of age or older consisting of making a determination that an individual is unable to protect himself from neglect, abuse or exploitation.

RESPIRE CARE

Care purchased from approved providers to provide services, in or outside the home, to substitute for parent/guardian care for the mentally retarded/developmentally disabled individual for short term, temporary periods when such care is needed because of necessary absence of the parent/guardian.

SHELTERED LIVING ARRANGEMENTS

Arrangement for locating and supervising the individual in a living situation outside of his own home, such as room and board arrangement, relatives home, domiciliary care or nursing home.

SHELTERED WORKSHOP/EMPLOYMENT

Work oriented habilitation and rehabilitation/program in a controlled environment which develops improved work habits, skills, and life experiences under supervision and direction.

SOCIALIZATION/RECREATION SERVICES

Assistance provided to individuals to participate in socialization and leisure time opportunities, such as, senior citizen's centers; public performances; social activities sponsored by fraternal, religious, civic and other groups and volunteer roles in community organizations.

SPECIAL SERVICES TO BLIND/VISUALLY HANDICAPPED

Arrangement for and assistance in using services provided by the Commission for Visually Handicapped.

TRAINING TO MAXIMIZE INDEPENDENCE

MENTAL HEALTH COUNSELING AND TREATMENT

Provision to a mentally ill/emotionally disturbed or maladaptive person of services, such as, diagnostic assessment counseling, either individual or group therapy including resocialization groups, after care supervision, community resource referral, crisis intervention services, and assistance in living arrangements are included.

NUTRITION SERVICES

Provision of information, advice, and counseling about nutritional needs, meal preparation, purchasing wisely to meet daily nutritional needs.

PROTECTIVE SERVICES TO CHILDREN

Services available without regard to income to the adult 18 years of age or older consist of certain basic components for, or on behalf of an individual who is unable to protect himself without help from neglect, abuse or exploitation.

PROTECTIVE SERVICES TO ADULTS

Services to adults 18 years of age or older consisting of making a determination that an individual is unable to protect himself from neglect, abuse or exploitation.

RESPIRE CARE

Care purchased from approved providers to provide services, in or outside the home, to substitute for parent/guardian care for the mentally retarded/developmentally disabled individual for short term, temporary periods when such care is needed because of necessary absence of the parent/guardian.

SHELTERED LIVING ARRANGEMENTS

Arrangement for locating and supervising the individual in a living situation outside of his own home, such as room and board arrangement, relatives home, domiciliary care or nursing home.

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SOCIALIZATION/RECREATION SERVICES

Assistance provided to individuals to participate in socialization and leisure time opportunities, such as, senior citizen's centers; public performances; social activities sponsored by fraternal, religious, civic and other groups and volunteer roles in community organizations.

SPECIAL SERVICES TO BLIND/VISUALLY HANDICAPPED

Arrangement for and assistance in using services provided by the Commission for Visually Handicapped.

TRAINING TO MAXIMIZE INDEPENDENCE

and planning, money management, community resource orientation, self help, social and interpersonal, and personal care.

*

TRANSPORTATION

Conveyance of the individual to and from needed community resources and facilities, when such conveyance is not available through their own resources or without cost from other sources such as Title XIX (Medicaid) for purposes of medical care.

WIN SUPPORTIVE SERVICES

Provision of employment - related medical and remedial care and services which are not included under the State's Title XX plan or otherwise available.

ANNEX I

DAAG-PLM

10 March 1977

MEMORANDUM FOR RECORD

SUBJECT: Human Services Support Plan Workshop

1. General. The undersigned attended a workshop on the status and concept of the Human Services Support Plan. The workshop was conducted by MAJ Frank Quinn, ADMINCEN on 23 Feb 77. Purpose of participation in the workshop was to collect information/data for possible use in the conduct of the study of the Army Community Service Program.

2. Discussion.

a. ODCSPER (DAPE-HR) tasked ADMINCEN (Feb 76) to develop concepts for integrating Human Service Support Activities (HSSA) into (1) the Army Personnel Management System and (2) the total command and staff structure.

b. Specific tasks include:

(1) Identification of functions, programs and activities that constitute HSS.

(2) Develop a prototype model of HSS functions.

(3) Determine the need, redundancy, voids, and excesses in HSS functions and programs.

(4) Describe advantages and disadvantages of integrating HSS programs and functions.

(5) Identify legal limitations.

(6) Develop staffing models (Installation) for integrating functions and programs.

(7) Develop models for delivering HSS at installation level.

(8) Describe resources required to support integration.

(9) Identify source of skills and training requirements.

(10) Identify existing personnel possessing required skills.

DAAG-PLM

SUBJECT: Human Services Support Plan Workshop

(11) Draft Army policy and doctrine for staffing.

c. Tasks 1-7 above have been or will be completed by Apr 77 for 58 of 200 functions identified as human services. Tasks 8-11 will be completed when all functions in the category of human services have been examined.

d. Some problem areas encountered during the conduct of this study are:

(1) Existing programs were designed, developed and operationalized to be self-contained delivery systems.

(2) Techniques for integration of HSSA are just beginning to be developed and tested.

(3) Integration of HSSA represents a threat to people, resources, careers, etc.

3. Summary. The HSSA study has uncovered many facts which will be useful in the conduct of the ACS study. The completion of the entire HSSA study is still far ahead and it is doubtful if the results of entire list of tasks, whether completed or not, will be implemented in the near future for reasons/problems stated in paragraph 2d above.


JOSEPH F. GORECKI

MAJ, GS

ACS Study Officer

ANNEX J

DAAG-PLM

11 March 1977

MEMORANDUM FOR RECORD:

SUBJECT: Meeting, MACOM ACS Officers

1. General. A meeting of MACOM ACS officers was held in the Forrestal Building on 25 Feb 77. MACOMS/organizations represented were TRADOC, FORSCOM, DARCOM, MDW, USAREUR, Community Service Division, MSD, ADMINCEN (HSSA Study chief) and P&O Directorate (ACS Study officer). Purpose of the meeting was to: discuss objectives of ACS study; review DAIG findings; and exchange ideas on respective ACS programs and thoughts for improvements.

2. Discussion.

a. LTC Jungck, Community Service Division, opened the meeting with an explanation of the purpose, introduction of participants and outline of the meeting. He indicated that in an attempt to improve training, the following actions have been initiated:

(1) An increase in the number of quotas and number of courses (from 3-5) taught at Ft Sam Houston, TX (ACS officer course - two weeks).

(2) Development of an exportable programmed instruction package to be provided to all ACS centers.

(3) Review of a film package on the budget process for possible use in training ACS personnel.

b. The objectives of the ACS study were briefed and ideas for improvement of ACS programs were solicited. All were in agreement that a revision of AR 608-1 was in order to provide a better structured and standardized ACS program. The development of "how to" pamphlet(s) was considered essential.


c. The DAIG findings and how they relate to the study and day-to-day ACS operations were discussed. All agreed that the observations were valid and that the study was a timely vehicle for correction of deficiencies noted.

d. Concern was expressed over the proposed reduction in MSC officers, specifically those who are assigned to ACS programs.

DAAG-PLM

SUBJECT: Meeting, MACOM ACS Officers

3. Summary. The MACOM ACS officers meeting provided a useful forum for surfacing problem areas in the ACS program and discussing possible solutions. All present agreed that the management of the program requires revision and that a more structured program is desired.


JOSEPH F. GORECKI
MAJ, GS
ACS Study Officer

ANNEX K

SECTION I - PREFACE

A. Course: 5H-F1, Army Community Service (ACS).

B. Purpose: To provide military personnel, Department of the Army civilians, and volunteer supervisors with a working knowledge of the Army Community Service Program to include program planning, administration, management and the delivery of human services in response to community needs. MOS for which trained: None.

C. Instructional objectives:

1. Discuss the Army Community Service Program with particular emphasis on the following: underlying concepts, mission and goals, and current issues and trends influencing service delivery.

2. Identify and perform necessary administrative tasks in the operation of an ACS program.

3. Identify and apply management principles and techniques that contribute to ACS organizational effectiveness, program development and mission accomplishment.

4. Identify and discuss specific ACS services (programs) and specialized community resources to assist ACS clientele.

D. Prerequisites:

1. The duty assignment of selected military personnel, civilian employees, and key volunteers must have a significant relationship to the administration/management of the ACS Program or a major activity within ACS. This includes the following kinds of personnel:

a. ACS Head (Chief, Officer, Coordinator, Director).

b. Professional Services Officer, Army Emergency Relief Officer, Specific Program Director.

c. NCOIC, ACS Program.

d. Volunteer supervisor and assistant volunteer supervisor.

2. Selected personnel must have at least 12 months retainability in ACS, be aware of course purpose, and have an express desire to attend.

3. Obligated service after completion of the course: None.
Security clearance required: None.

E. <u>Length:</u>	<u>Peacetime</u>	<u>Mobilization</u>
	2 weeks	None
F. Training location:	Academy of Health Sciences Fort Sam Houston, Texas	None
G. MOS feeder pattern:	None.	
H. Ammunition requirements:	None.	
I. Common subjects recapitulation:	Not applicable.	

SECTION II - SUMMARY

ARMY COMMUNITY SERVICE COURSE

Peacetime: 2 weeks; *89 hours
Mobilization: None

Subject	Hours		Annex	Page
	Peace	Mob		
A. Academic subjects:				
Army Community Service Program	12		A	5
Administrative Tasks	15		B	7
Management Principles and Techniques	40		C	10
ACS Services (Programs) and Specialized Community Resources	12		D	14
Examination	2		E	16
Subtotal	81			
Bibliography				18
B. Nonacademic subjects:				
Inprocessing	3			
General	1			
Outprocessing	4			
Subtotal	8			
Total	89			
C. Recapitulation:				
1. Security classification				
SECRET RESTRICTED DATA	0			
SECRET	0			
CONFIDENTIAL	0			
UNCLASSIFIED	89			
Total	89			
2. Types of instruction				
Conference	9			
Discussion	28			
Examination	2			
Lecture	22			
Nonacademic	8			
Practical Exercise	20			
Total	89			

*Students receive 72 hours of academic and eight hours of nonacademic instruction for a total of 80 hours. Sixty-three academic hours are common instruction, required of all students. From the remaining 18 hours students select nine hours of subjects offered.

SECTION III - BODY

ACADEMIC SUBJECTS TEACHING RESPONSIBILITIES

Peacetime: 81 hours
Mobilization: None

Division and Subject or Annex Title & Subject	Hours		Annex	Page
	Peace	Mob		
<u>Behavioral Science Division</u>	(58)			
History and Conceptual Base of ACS	2		A	5
ACS Program: Policy Changes, Services and Trends	2		A	5
ACS Programs and Problems	6		A	5
Volunteer Issues and Trends: Recruitment, Training and Utilization	2		A	5
Leadership Skills in Discussion Groups	3		C	12
Program Building I	2		C	10
Program Building II	3		C	10
Program Building III	3		C	10
Program Building IV	3		C	11
Program Building V	3		C	11
*Reality Model of Human Behavior	2		C	12
Organizational Development	15		C	12
*Transactional Analysis Model of Human Behavior	2		C	12
*Army Emergency Relief Fund Management	3		D	14
Personal Commercial Affairs	1		D	14
Programs for Exceptional Children	3		D	15
Coordinated Human Services	1		D	15
Examination	2		E	16
<u>Health Care Administration Division</u>	(23)			
Staff Study I	2		B	7
*Staff Study II	2		B	7
Manpower I	2		B	7
*Manpower II	3		B	7
Appropriated Funds Utilization in Support of ACS Program	2		B	7
Nonappropriated Funds Utilization in Support of ACS Program	2		B	8
Appropriated/Nonappropriated Funds - Budget Exercise	2		B	9
*Briefing Techniques	2		C	11
*Survey of Civilian Personnel Management in Department of the Army	2		C	11
CHAMPUS I	2		D	14
*CHAMPUS II	2		D	14

*All subjects given are pertinent to the Army Community Service Program. Due to the complexity of the Army Community Service Program and the heterogeneous student body, it has been necessary to offer the student a choice of instruction. This has been

done through the "elective system". Some instruction is given to the entire student body and some instruction is presented as an "elective" (indicated by an asterisk). The elective system offers the student a choice of two presentations with the student selecting one based upon his job responsibilities.

[illegible]

SERVICES AVAILABLE	NO. SVCS	SERVICES AVAILABLE	NO. SVCS
b. Financial Aid		e. Relocation Services (Continued)	
(1) Army Emergency Relief		(12) Other (Specify)	
(2) Army Relief Society			
(3) Other (Specify)		TOTAL (1 thru 12)	
TOTAL		f. Emergency Assistance	
c. Exceptional Children		(1) Fire, Flood, or Natural Disaster	
(1) CHAMPUS Information/Referral		(2) Food	
(2) Summer Day Camp		(3) Clothing	
(3) Seminars/Discussion Groups		(4) Dependent Nonsupport	
(4) Other (Specify)		(5) Transportation	
		(6) Other (Specify)	
TOTAL		TOTAL	
d. Child Advocacy		g. Counseling (Personal and Family)	
(1) Adoption Counseling/Referral		(1) Individual	
(2) Foster Home Assistance		(2) Group	
(3) Child Abuse and Neglect Services		(3) Couple	
(4) Emergency Child Care		(4) Family	
(5) Child Care Training Classes		(5) Parent-Child	
(6) Family Life Education		(6) Other (Specify)	
(7) Big Brothers/Big Sisters		TOTAL	
(8) Teen Employment		h. Community Life	
(9) Other (Specify)		(1) Neighborhood Associations	
TOTAL		(2) Community Improvement Actions	
e. Relocation Services		(3) Outreach Actions	
(1) Household Goods Lending Closet		(4) Other (Specify)	
(2) Welcome Packets		TOTAL	
(3) In/Out Processing		i. General Assistance	
(4) Hospitality/Welcome Center Visits		(1) Retirement Services	
(5) Relocation Fact Sheets		(2) Survivors Assistance	
(6) Community Orientations		(3) ID Cards	
(7) Installation Packet Library		(4) Citizenship Training	
(8) Housing Assistance		(5) Allotments	
(9) Passports and Other Travel		(6) Locator	
(10) ACS Registration Cards Action		(7) Other (Specify)	
(11) Welcome Visits		TOTAL	

10.

COMMERCIAL AFFAIRS STATISTICS

a. Types of services:

	NUMBER OF SERVICES								TOTAL
	E1-E5		E6-E9		O1-O3		O4-O10		
	SVC	DEP	SVC	DEP	SVC	DEP	SVC	DEP	
(1) Budget education/information									
(2) Budget counseling									
(3) Job referral									
(4) Consumer arbitration									
TOTAL									
b. Indebtedness profile (debt liquidation service only)									
(1) Total strength of installation									
(2) Number of personnel enrolled									
(3) Number of cases successfully completed									
(4) Total indebtedness (dollars)									
(5) Average debt per person at enrollment									
(6) Estimated total reduced indebtedness									

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